FORM D

PROCESSED

APR 1 8 2008 E

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

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ОМ	B Nun	nber:	32	35-007
Exp	ires:	Apri averaç	30,	2008
Esti	mated	averag	e bu	rden
hou	rs ner	resnon	60	16.00

SEC USE ONLY

DATE RECEIVED

Serial

UNIFORM LIMITED OFFERING EXEM	IPTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Palmaz Scientific Inc. common stock	SECMON
Filing Under (Check box(es) that apply):	SEC Mail Processing
A. BASIC IDENTIFICATION DATA	APR 1 1 2000
I. Enter the information requested about the issuer	Nan
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Palmaz Scientific Inc.	Washington, DC
Address of Executive Offices (Number and Street, City, State, Zip Code) 2100 McKinney Avenue, Suite 1500, Dallas, Texas 75201	Telephone Number (Including Area Code) 214-520-9292
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Medical devices and technology	
business trust limited partnership, to be formed Month Year	please specify): OBO46783 imated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

DE

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- Attention -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA		
2. Enter the information re	equested for the fol	lowing:			
Each promoter of the second control of	the issuer, if the is:	suer has been organized v	vithin the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
Each executive off	ficer and director o	f corporate issuers and of	corporate general and mai	naging partners of	partnership issuers; and
Each general and r	nanaging partner o	f partnership issuers.			
Charle Day(as) that Assault		D			
Check Box(es) that Apply:	✓ Promoter	■ Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, i Solomon, Steven B.	f individual)				
Business or Residence Addre 2100 McKinney Avenue,	ess (Number and Suite 1500, Dal	Street, City, State, Zip C las, Texas 75201	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
					.,,.,
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			<u> </u>	
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			 -	
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	 			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
				 	

					В. І	NFORMAT	ION ABOU	T OFFERI	NG				
•									4 : 60			Yes	No
1.	Has the	issuer son	d, or does tl							_	***************************************		×
2.	What is	the minin	num investn			n Appendix		_				s 10,	00.00
2.	W Hat 15	the minim	ium mvesui	ieni mai w	in be acce	pted Hom a	any marvio	iuai r,				Yes	No
3.	Does the offering permit joint ownership of a single unit?											×	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								:				
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Lip Code)			<u></u>			
Nar	ne of Ass	enciated R	oker or De	aler						_	<u> </u>		
1141	ne or 713.	ociaica Di	OKCI OI DC	aici									
Stat	es in Wi	iich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)				***************************************		•••••	☐ AI	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full	Name (Last name	first, if indi	ividual)						_			
Bus	iness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nan	ne of As:	sociated B	oker or Dea	aler						<u> </u>			
Stat	es in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)				************			Al	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Full	Name (Last name	first, if indi	vidual)									 -
Bue	iness or	Decidence	Address (N	Jumber on	d Street C	ity State	Zin Code)						
Dus	mess of	Residence	Address (1	Number an	u succi, C	ity, State, 2	cip Code)						
Nan	ne of Ass	ociated Bi	oker or Dea	aler									
Stat	es in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers					 	
	(Check	"All State:	s" or check	individual	States)			***************************************	***************************************		······	☐ A1	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s	\$
	Equity	\$ 12,000,000.00	\$ 408,000.00
	Convertible Securities (including warrants)	s	\$
	Partnership Interests	\$	\$
	Other (Specify LLC Interests		\$ 0.00
	Total	\$ 12,000,000.00	\$ 408,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases 408,000.00
	Accredited Investors		T
	Non-accredited Investors		<u>\$</u> 0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Tour of Official	Type of	Dollar Amount
•	Type of Offering	Security	Sold
	Rule 505		2
	Regulation A		\$
	Rule 504		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		\$_0.00
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	Z	\$_20,000.00
	Accounting Fees		\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Travel expenses	_	\$ 5,000.00
	Total		c 25,000.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted g	gross	11,975,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	ly purpose is not known, furnish an estimate f the payments listed must equal the adjusted g	and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		7 \$ 700,000.00	57 \$ 3,000,000.00
	Purchase of real estate			
	Purchase, rental or leasing and installation of mac	hinery	_	
	Construction or leasing of plant buildings and fac	ilities		\$
	Acquisition of other businesses (including the val offering that may be used in exchange for the assessuer pursuant to a merger)	ts or securities of another		以 \$_3,200,000.00
	Repayment of indebtedness		800,000.00	
	Working capital			
	Other (specify):			
	Column Totals		🗸 💲 1,500,000.0	\$_10,475,000.00
	Total Payments Listed (column totals added)		🗸 \$ <u></u>	,975,000.00
		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acco	nish to the U.S. Securities and Exchange Cor	nmission, upon writte	
SSI	uer (Print or Type)	Signature	Date	
Pa	lmaz Scientific Inc.	ST PES	- April 10, 2008	
Vai	me of Signer (Print or Type)	Title of Signer (Print or Type)	J	
te	ven B. Solomon	President		
		I		

ATTENTION ———

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
I.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ≅ l
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Palmaz Scientific Inc.	255	April 10, 2008
Name (Print or Type)	Title (Print or Type)	
Steven B. Solomon	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX										
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK											
AZ											
AR											
CA		×	\$12mm common	0	\$0.00	0	\$0.00		×		
со		×	\$12mm common	0	\$0.00	0	\$0.00		×		
СТ											
DE											
DC											
FL		×	\$12mm common	0	\$0.00	0	\$0.00		×		
GA											
ні											
ID											
IL		×	\$12mm common	0	\$0.00	0	\$0.00		×		
IN											
IA											
KS											
KY											
LA											
ME											
MD								<u></u>			
MA											
MI											
MN											
MS											

APPENDIX 2 3 1 4 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach Type of investor and to non-accredited offering price explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 2) (Part C-Item 1) (Part B-Item 1) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Investors Amount Amount Yes No MO MT NE NV NH NJ NM \$12mm common 0 X 0 \$0.00 \$0.00 NY × NC ND OH $\mathbf{O}\mathbf{K}$ OR PΑ RI SC SD TN \$12mm common 5 \$0.00 TXX \$408,000.00 0 X · UT VT VAWA WVWI

				APP	ENDIX				
1		2	3 Type of security		4				
	to non-a investor	to sell accredited is in State a-Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									